FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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hours per response	9. 0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* <u>Kyle Jerry V. Jr.</u>					2. Issuer Name and Ticker or Trading Symbol Black Stone Minerals, L.P. [ BSM ]										icable)	erson(s) to Issuer				
(Last) 1001 FA	oot) (Firot) (Middle)				07/0	3. Date of Earliest Transaction (Month/Day/Year) 07/01/2022									Officer (give title Other (specify below) below)					
(Street)	ON TX	ζ 7	77002		4. If <i>i</i>	ment, C	Date	of Origi	nal Fil	ed (Month/Da		6. Individual or Joint/Group Filing (Check Application)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						ole		
(City)	(Sta	ate) (2	Zip)																	
		Table	I - N	on-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed of	, or B	Benefic	ially C	Owne	ed				
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					and Securities Beneficia Owned Fo		ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	e Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)	Instr. 4)			
Common units representing limited partner interests			07/01/20	07/01/2022				<b>A</b> <sup>(1)</sup>		1,369	A	\$13.6	i9	250,1	151	I	)			
Common units representing limited partner interests													250,0	088	]	I	By Lena Anderso Kyle 19 Trust	on		
Common units representing limited partner interests													350,1	182	]	I	By Lena A Kyle Trust	ı C		
Common units representing limited partner interests												4,000(2)		I		By fami limited partners				
		Та	ble II								oosed of, convertib				wnec	1				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa	snsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		nber ative ities red sed 3, 4	6. Dat		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Prio Deriva Secur (Instr.	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially Direct or Ind (I) (Insection(s)		nip of Inc Bene O) Owner oct (Instr	ficial ership			
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or Number of Shares							

## **Explanation of Responses:**

- 1. Pursuant to a previous arrangement, the Reporting Person elected to receive common units in lieu of a cash retainer for service on the Board of Directors of the Partnership's General Partner.
- 2. Prior to the date of this report, four individual family trusts previously reported by the Reporting Person contributed common units to a family limited partnership in a non-reportable transaction. As a consequence, the individual family trusts no longer hold common units and will no longer be reported by the Reporting Person.

## Remarks:

/s/ Steve Putman, attorney-infact for Jerry V. Kyle, Jr.

07/05/2022

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.